

**ARKANSAS INSURANCE DEPARTMENT
1200 WEST THIRD STREET
LITTLE ROCK, ARKANSAS 72201**

PHONE 501-371-2750

Instructions for Registration
As a
Third Party Administrator

1. Applicant must complete application for the registration and submit to the Arkansas Department a check the amount of \$100.00 The check must be made payable to the “**The State Insurance Department Trust Fund.**”
2. A \$25,000 Surety Bond executed by an authorized admitted insurer, using the bond form provided, must be filed with the Department by attachment to the application.

Note: Any applicant operating only pursuant to an administrative services agreement who does not collect, receive or remit funds on behalf of the plans is exempt from the bond requirement; also, any applicant performing services only on behalf on single employer self-funded plans or collectively bargained plans, need no submit the bond which is otherwise required.

3. As changes occur, you are required to provide the department with an update on the list of self insured plans and trusts for which your act as administrator. You must have a registration form completed and attached to your notification to the Department. (The attached form may be duplicated.) Any change in other information listed on your application should be promptly reported to the Department.
4. The individual completing the application on behalf of the third party administrator must sign the application.
5. Renewal of your certificate of registration will be due annually on or before January 1, of each year. The renewal registration of the plans will be required with the renewal application.
6. All service agreements between the third party administrator and the listed plans must be filed with this registration.
7. All third party administrators are responsible for assuring that the plans they administer are themselves duly registered.